CLAIMS ONLY		Application Number	Filing Date
		10 802799	
		Applicant(s)	

*May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1								51						
2								52						
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44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
Total Indep	3							Total Indep						
Total Depend	13							Total Depend						
Total Claims	16							Total Claims						